

Stamp Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER	67	7-8-97
EXAMINER	800	10-3-97
TYPIST		
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	1/1/97
2	1/1/97
3	1/1/97
4	1/1/97
5	1/1/97
6	1/1/97
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Best Available Copy

SYMBOLS

- ✓ Rejected
- = Allowed
- (Through number) Canceled
- Restricted
- † Non-elected
- Interference
- A Appeal
- O Objected

Claim	Date
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